

Reiki in Hospitals



What the Doctor

to provide better care for their patients

"I envision a health care environment in which healing is as valued as cure, and the care of the entire health care staff and patient's family is as important as the care of the patient."

With this revolutionary intent, Pamela Miles is bringing Reiki into hospitals and other clinical settings in New York City.

She is not alone. In New England, volunteer Reiki clinics operate alongside community hospitals. Nurses and other medical staff in Washington and Oregon are Reiki-trained to provide better care for their patients and themselves. Reiki projects are springing up in Atlanta, Boston, Birmingham, Tucson and other communities around the United States. A growing handful of pioneer physicians incorporate Reiki into their medical practices.



Pamela Miles

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by Barbara McDaniel

How does the homely "folk art" of Reiki fit beside the high-tech machinery of contemporary American medicine? Very well, thank you. But patience and respect are advised when introducing "traditional" healing methods like Reiki into contemporary medical settings.

St. Luke's Roosevelt HIV Center

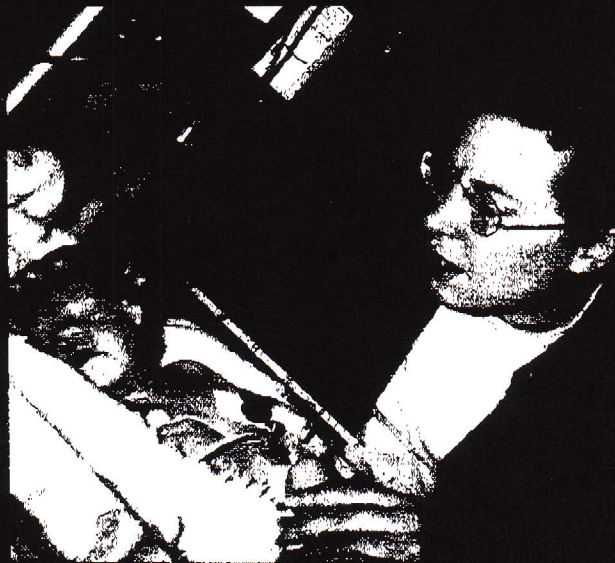
The HIV Center at St. Luke's Roosevelt Hospital in New York is one of the oldest and largest HIV care facilities in the US. Since 1996 the Center has offered a program of complementary therapies – shiatsu, hatha yoga, meditation, and Reiki – to help its clients manage their stress and develop healthy lifestyles to minimize hospitalization. In addition to treatments, the Center sponsors Pamela Miles to offer Reiki training four times a year. Medical

residents from Columbia University observe these classes as a part of their training in integrative medicine.

How does it help? "We see a lot of people with anxiety disorders," said HIV Center Program Director, Robert Schmehr. "It's one reason why people use drugs. When they're in treatment, getting clean and dealing with their HIV, their anxiety rises. They can't ride subways, can't go out in social situations. We teach them to use Reiki to deal with that anxiety, and it gives them a feeling of being empowered. It's something they can do for themselves."

The HIV Center serves more than 2000 clients on an outpatient basis. Ninety-nine percent are on medical assistance. About 60% have a history of incarceration and nearly two-thirds have a record of intravenous drug use. Reiki training is funded by foundation grants, and between

Ordered



Willa Mary gets Reiki in Pediatric Intensive Care



40 and 60 patients take advantage of the offering each year.

Robert sees that Reiki makes life livable for this population. "Reiki can be a tangible part of their substance abuse recovery program," he explained. "It's relapse prevention."

Reiki Master Pamela Miles oversees the volunteer treatment program, and teaches the classes. "What I see in addicts is a natural spirituality run amok — a desire to surrender without discernment as to what is worthy of surrender. In a Reiki class, students for the first time experience something within them that's pure, that soothes them. I tell them, 'Reiki is like mother's milk. You're nursing yourself with your hands.' It connects them to their spirituality and helps them begin to break the bonds of their addiction and to heal themselves."

Robert estimates that 50% of the patients trained actually use their Reiki. Of that number, another half of them use

it daily and incorporate it as a significant part of their healthcare, regulating stress and managing their pain. "Immunologically, we can't measure Reiki's effect; there are just too many variables. But I can say without question that the clients who use Reiki live healthier lives."

A Professional Approach

Robert was instrumental in getting Reiki into the HIV Center. "I first experienced Reiki seven years ago," he recalled. "It became the core of my healing, both emotional and physical. I wanted to apply it here, but I couldn't find the way to bring it into the professional medical environment. Until I met Pamela. She has the right personality, the right kind of professionalism that helped us bridge the gap."

Pamela's "right kind of professionalism" has opened doors to medical centers throughout New York City. In addition to her work at St. Luke's Roosevelt, she has

presented complementary therapies to medical staff and patients at Beth Israel Medical Center, Columbia Presbyterian Medical Center, Montefiore Medical Center, Memorial Sloan Kettering Cancer Center, St. Vincent's Hospital, Kessler Institute for Rehabilitation, and Terence Cardinal Cooke Health Care Center. She also maintains a private Reiki practice.

What is her motivation for taking Reiki into hospitals? "I perceive a need for healing and spirituality to be brought back into medicine," Pamela explained. "I come from a long line of nurses. I'm squeamish so I didn't choose to practice medicine, but I share that desire to heal. And I had a lot of early exposure to the medical environment."

Pamela believes that the way to make healing available to the largest number of people is to go through the medical professions, and she has a genuine

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compassion for medical professionals. "I couldn't tolerate witnessing the kind of suffering that doctors and nurses witness on a daily basis without being able to do something to relieve it. Reiki is a powerful support for their work, and the simplest support."

"By getting Reiki into hospitals, we can start healing our medicine."

Pamela was a professional healer for many years before she heard about Reiki. "I always helped other people, but my own immune system was compromised. I was sick in bed one or two days every month. I didn't know how to bring this healing into service for my own body. Reiki changed that. Reiki gave me an incredible self help tool. It's astounding how healthy I became." Empowering the patient - providing tools that help people help themselves - is one of her great rewards as a Reiki Master.

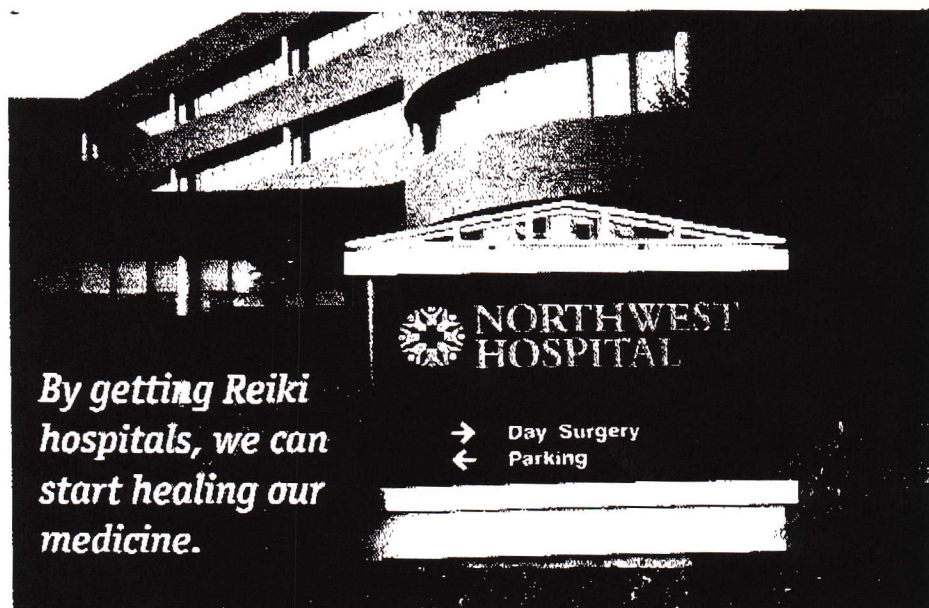
Speaking the Language

Reiki Master Norma Jean Young relies on her nursing background when she teaches Reiki to medical professionals in holistic hospitals on the West Coast. "The hospitals I work with are willing to offer Reiki training for staff - even to pay for it - and to let staff use Reiki in their jobs. We, as Reiki practitioners, need to be prepared to talk their language, and to understand and learn more from the medical perspective."

Pamela agrees. "The medical world is the doctor's domain. We're the interloper. We must communicate the practice in a clean and simple way, without a lot of dogma."

Pamela cautions that people who do healing work are often blind to their assumptions about healing, about the medical profession, and about Reiki. "There's no place for fanaticism in the medical environment. No matter what we may feel about the superiority of Reiki, a hospital is a medical domain and Reiki will always be in a supporting position in that environment."

Pamela and Norma Jean both advocate Reiki research, but acknowledge the



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difficulty of applying Western scientific standards to study its effect. A simple place to begin would be to replicate studies done on the healing effects of prayer and Therapeutic Touch.

"You don't have to have proof to speak the doctor's language," Pamela asserted. "I tell them there's no scientific proof for this, but there's also no scientific proof against it. At the moment we don't have the technology to dissect the subtle energy field of the body in the same way we can dissect a physical body. But science does acknowledge that energy field, and can measure that this field appears strongest at the hands and feet."

"I also remind them that healing and a form of medicine existed for thousands of years before science was created by the human mind," she continued. "Besides, doctors know that if you give 20 patients a 'proven' medication, you'll get many different responses to it. Addressing this is almost a relief to them. Most can relate to this framework for the practice of Reiki."

Healing The Healers

American healthcare has been under scrutiny for years. Consumers and providers feel the effects of what one doctor called "churn-them-out" medicine. News stories often report the negative impact of this profit-driven philosophy on the patient. Bringing Reiki into the medical setting could soothe the less publicized but equally real pain of doctors, nurses, and other healthcare professionals.

"We offer something they need for themselves and they know it," said Pamela. "They sorely feel the lack of healing in their world. We must carry that gift lightly and with a lot of compassion."

"One way I can help medical people is to help them realize Reiki is so flexible it can be invisible. Doctors can learn to treat themselves before they integrate Reiki into the care for their patients."

To Norma Jean, pain management is the area crying for Reiki application especially in cancer care. "Oncologists feel so bereft that they have only three courses of treatment - chemotherapy, radiation, and surgery. It's a place of great need, for the patient and the professional. If Reiki research and practice concentrated on breast cancer alone it would be incredible."

Professional Training

The discussion of using Reiki in hospitals brings up the issue of professionalism in Reiki training. Pamela stressed, "Reiki training is not professional training. Students will find a lot of crossover if they are already trained in a healing profession, but if people have no training for how to be in a clinical or therapeutic setting, they need to develop those skills. I tell them to start by treating themselves, then to slowly branch out to treating family and friends. From there, they can pursue other skills."

How would a Reiki student start a clinical program in his local hospital? Norma Jean has been working with some

hospitals for ten years, slowly building the relationships necessary to found a successful program.

Pamela advised, "Ask a lot of questions before you start. Find out as much as you can about this population - physicians as well as patients. The more you know about their needs, the more you can address them directly. And you must communicate your genuine respect for their profession."

Clear communication about Reiki, and offering personnel an opportunity to experience a treatment are key. Most successful hospital programs also hinge on the advocacy of an "insider," someone like Robert Schmehr in a position to influence management decisions. It takes a lot of time and energy to initiate a project and to sustain it.

"I'm a practical realist," Norma Jean confessed. "I look for the opportunity, and I go where I'm invited. I see that grassroots efforts make big changes happen in the world."

Can Reiki and other natural therapies be successfully integrated with medicine? Robert thinks it's too early to say. "It depends on how well current integrative medicine programs can demonstrate their efficacy. We need to show that we're really helping people, and to quantify our results so Western medicine can understand what we're doing."

"We need to educate, to offer treatment to staff," he went on. "If possible, we need to offer training so staff can understand it better. The Reiki treatment should also be a part of the medical record. It helps the other care professionals see its effect."

"African traditional medicine believes there's no healing without a change of consciousness," Pamela said. "Reiki effects that kind of change." With time and patience, Reiki may bring a change of consciousness about what constitutes healthcare in the United States and in the world, integrating the effectiveness of scientific method with the age old mystery of healing touch. ■

Experiences of Reiki In Clinical Practice

Jill Baron, MD, worked in a women's health clinic on Long Island when she began to incorporate Reiki into her practice.

- "I started to do Reiki on all my patients and they calmed down. The healing power of touch can't be underestimated. That connection with life force connects you with the patient. I think Reiki can be a tremendous adjunct to medicine, but first we need education for the physicians and the insurance companies."

Dan Garfinkel, MD, uses Reiki in his private practice near Washington, DC.

One of Dr. Garfinkel's elderly patients came in with aching hands. He sat holding her right hand in his two huge hands as they talked together. When she left she told him her hand felt better. She called him the next day to say that her hand *still* felt better, and that the other hand felt better, too!

- "One barrier to using Reiki in a clinical setting is the emphasis on what's covered by insurance companies. People find it difficult when it comes to healthcare to spend money on something that's not covered. The same people will spend the same money on some fleeting pleasure. Reiki is a gift that will last your lifetime! But it's difficult for people to understand."

Margo Davis, Reiki Master, provides treatment as a hospice volunteer.

- "I advise Reiki practitioners to be sensitive to the fears of the hospital staff about taking on something new. Once they experience Reiki they no longer feel threatened by it. Just be low-key and offer it when it feels appropriate. It's easier to do that when you're in the hospital or hospice setting for a general purpose as a volunteer than if you specifically go there for Reiki."

Larry Palevsky, MD, is former head of pediatric emergency at Lenox Hill Hospital in New York. Dr. Palevsky has used Reiki "hundreds of times" in the delivery room. He tells one story after another of babies who exhibit breathing problems shortly after birth. Instead of applying the usual interventions, Dr. Palevsky says, "I put one hand on the back of the head and one hand on the top and stand there and do Reiki. Ninety-nine out of one hundred times, I watch the babies come into themselves. Breathing normalizes, muscles relax. The little noises they make as a sign of distress resolve. All within ten to fifteen minutes."

- "It's very distressing that everyone feels they need to validate a practice with the use of Western standards, trying double-blind studies for something that's been used for thousands of years. For the skeptics who need research, go ahead, but I think it's redundant. We don't need research to prove what's already been proven." ■